

Applicant: John L. Tetenes

Rev. 2-2001

Serial No.

Doc. No.: TETJ13A

Filed: with Application

Invention: DEVICE FOR HOLDING A BUCKET OF FROZEN CHUM

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9(f) and 127(b)) - INDEPENDENT INVENTOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of 35 U.S.C., to the Patent and Trademark Office with regard to the invention entitled: DEVICE FOR HOLDING A BUCKET OF FROZEN CHUM described in the application filed herewith.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person has made the invention or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed or licensed or am under an obligation under contract or law to assign, grant, convey or license any rights in the invention listed below:

☒ [X] no such person, concern, or organization  
☐ [ ] persons, concerns or organizations listed below

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
☐ [ ]-INDIVIDUAL ☐ [ ]-SMALL BUSINESS CONCERN ☐ [ ]-NONPROFIT ORGANIZATION

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
☐ [ ]-INDIVIDUAL ☐ [ ]-SMALL BUSINESS CONCERN ☐ [ ]-NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in the loss of entitlement to small entity status prior to paying or at the time of paying the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon or any patent to which this verified statement is directed.

SIGN HERE--->>

Date: 11-20-01  
^^ DATE ABOVE ^^^



Legal Signature of: John L. Tetenes *SR*

\*\*\*\* IMPORTANT \*\*\*\* PLEASE CORRECT OR FILL IN ANY MISSING  
INFORMATION, READ, SIGN, & RETURN TO RICHARD L. MILLER, P.E.

10027358-122601

## DECLARATION, POWER OF ATTORNEY, AND PETITION FOR PATENT APPLICATION Rev.2-2001

As a below named inventor, I hereby declare that: My residence, mailing address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: DEVICE FOR HOLDING A BUCKET OF FROZEN CHUM, the specification identified by Agent's Docket Number: TETJ13A of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application(s)</u>			<u>Priority Claimed</u>		<u>Certified Copy Attached?</u>	
<u>NONE</u> (Number)	<u>NONE</u> (Country)	<u>NONE</u> (Date Filed)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No


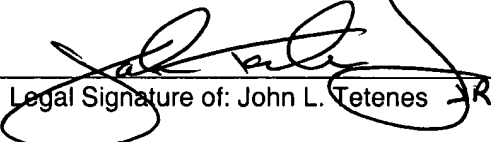
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

<u>NONE</u> Provisional Application Number(s)	<u>NONE</u> (Date Filed)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following agent to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: RICHARD L. MILLER, Registered Patent Agent Registration No. 26,309, 12 Parkside Drive, Dix Hills, N.Y. 11746-4879, PHONE (631) 499-4343

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

Date: 11-20-01  SIGN HERE-->>>  
 ~~~ DATE ABOVE ~~~  
 Legal Signature of: John L. Tetenes 

Residence.....: Copiague, NY 11726  
 Citizenship.....: THE UNITED STATES OF AMERICA  
 Mailing Address.: 1355 Akron Street, Copiague, NY 11726

This form may be executed only when attached to a completed application as the last page thereof.  
 \*\*\*\* IMPORTANT \*\*\*\*\* PLEASE SIGN & RETURN THIS COMPLETED APPLICATION TO RICHARD L. MILLER, P.E.

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